

☐ In the Municipal Court of
☐ In the Justice Court of Clark County
Court Case #

**State of Nevada
CLARK COUNTY**

Las Vegas Metropolitan Police Department

TRAFFIC/MISDEMEANOR CITATION/COMPLAINT

☐ Adult ☐ Juvenile

☐ Traffic ☐ Accident
☐ Non-Traffic ☐ Warning
☐ Parking Meter #

☐ School Zone ☐ Hazmat
☐ Construction Zone ☐ S.T.E.P.

☐ Urban ☐ Rural

Travel Direction: ☐ N ☐ S ☐ E ☐ W

Beat/
Area:

Mile
Marker:

COURT

Event #:

ID #:

☐ Injuries ☐ Crime Report
☐ Officer's Report

☐ Evidence Logged ☐ Arrest

☐ Aircraft Clock Number
☐ Radar ☐ Other
Explain:

At Location:

Violation Date:

Time:

Issue Date:

Time:

Day Code: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7

Defendant Type: ☐ Driver ☐ Passenger ☐ Pedestrian

☐ Other Explain:

Had Been Drinking: ☐ Yes ☐ No ☐ Unknown

Test Type: ☐ PBT ☐ Blood ☐ Breath ☐ UA

☐ Drugs Suspected Results: %

THE UNDERSIGNED CERTIFIES AND SAYS THAT IN THE STATE OF NEVADA

NAME (Last, First, Middle):

Social Security #:

Address: ☐ Physical ☐ Mailing

City:

State:

Zip:

Ctry:

DOB:

Race:

Sex:

Height:

Weight:

Hair:

Eyes:

OLN / ID:

☐ CDL

State:

Class:

Expiration:

Restrictions:

Endorsements:

Vehicle has current proof of insurance? ☐ Yes ☐ No

Expiration Date of Insurance Card:

DID OPERATE THE FOLLOWING VEHICLE/MOTOR VEHICLE AT THE ABOVE LISTED LOCATION:

Commercial Vehicle ☐ US DOT #:

VIN #:

Vehicle License:

Lic. State:

Expiration:

Year:

Make:

Model:

Type:

Color:

Reg. Owner:

☐ Same

Address:

DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE(S):

1. Violation

Posted
Speed:

Actual
Speed:

Cited Speed:

☐ NRS ☐ CFR ☐ County Code ☐ Municipal Code

To Wit:

NRS/County/City #

Violation Code:

2. Violation

To Wit:

☐ NRS ☐ CFR ☐ County Code ☐ Municipal Code

NRS/County/City #

Violation Code:

I certify (or declare) that I have reasonable grounds/probable cause to believe and do believe that above named person committed the above offense(s) contrary to law.

Officer/Complainant's PRINTED Name:

Officer/Complainant's Signature:

P#:

Bureau:

Las Vegas
Municipal Court
400 Stewart Ave.
Las Vegas, NV 89101
1-800-654-6856
229-6497

Las Vegas
Justice Court
200 S. Third St.
Las Vegas, NV
89155-2511
455-4435
1-877-455-1289

Juvenile Justice
Services
601 N. Pecos Rd.
Las Vegas, NV
89101
455-5380

Goodsprings
Justice Court
Box 19155
Jean, NV 89019
874-1405

Henderson
Justice Court
243 Water St.
Henderson, NV
89015
455-7980

Henderson
Municipal Court
243 Water St.
Henderson, NV
89015
565-2075

North Las Vegas
Justice Court
2428 Martin Luther King
Blvd., North Las Vegas, NV 89032
455-7801

Township:

Justice Court:

Phone:

You are hereby ordered to appear on
to answer the above charge(s).

day of

year

at

a.m.

p.m.

OR ☐ Regular
Business Hours

**WITHOUT ADMITTING HAVING COMMITTED THE ABOVE OFFENSE(S), I HEREBY PROMISE TO RESPOND AS DIRECTED ON THIS
NOTICE AND WAIVE MY RIGHT TO BE TAKEN IMMEDIATELY BEFORE A MAGISTRATE (NRS 484.799 AND NRS 484.803).**

Defendant's
Signature

X

☐ Interpreter
Needed?

☐ Court
Mandatory

Violation Code(s):

REV. 7-04/1/2000

Failure to comply with this complaint or future dates relating to this complaint will constitute a separate offense.

1-03545526 A

1-03545526A



In the Justice/Municipal Court of		State of Nevada Nevada Highway Patrol <small>Revision Date February 23, 2003</small>		Citation #: IS 183726	
Court Case #				Accident #: _____ Event #: _____ <input type="checkbox"/> Evidence Logged <input type="checkbox"/> Arrest	
<input type="checkbox"/> Adult <input type="checkbox"/> Juvenile <input type="checkbox"/> Traffic <input type="checkbox"/> Accident <input type="checkbox"/> Non-Traffic <input type="checkbox"/> Warning <input type="checkbox"/> Parking <input type="checkbox"/> Meter #		Traffic / Misdemeanor Citation/Complaint <input type="checkbox"/> School Zone <input type="checkbox"/> Hazmat <input type="checkbox"/> Aircraft Clock Number: _____ <input type="checkbox"/> Construction Zone <input type="checkbox"/> S.T.E.P. <input type="checkbox"/> Radar <input type="checkbox"/> Other <input type="checkbox"/> Urban <input type="checkbox"/> Rural Explain: _____			
Travel Direction: North: <input type="checkbox"/> South: <input type="checkbox"/> East: <input type="checkbox"/> West: <input type="checkbox"/> Beat/Area: _____ Mile Marker: _____					
At Location: _____					
Conditions/ Weather: _____		Road: _____		Traffic: _____	
Violation Date: _____ Time: _____		Day Code: _____			
<input type="checkbox"/> Same Issue Date: _____ Time: _____		Defendants Phone #: _____			
Defendant Type: _____		Had Been Drinking: Yes: <input type="checkbox"/> No: <input type="checkbox"/> Unk: <input type="checkbox"/>			
Driver: <input type="checkbox"/> Passenger: <input type="checkbox"/> Pedestrian: <input type="checkbox"/> Other: <input type="checkbox"/>		Test Type: PBT: <input type="checkbox"/> Blood: <input type="checkbox"/> Breath: <input type="checkbox"/> UA: <input type="checkbox"/>			
Explain Other: _____		Drugs Suspected: <input type="checkbox"/> Results: _____ %			
THE UNDERSIGNED CERTIFIES AND SAYS THAT IN THE STATE OF NEVADA, CITY/COUNTY					
Name (Last, First, Middle): _____ DOB: _____					
OLN/ID: _____		CDL: <input type="checkbox"/> State: _____ Class: _____		Expiration: _____	
Race: _____ Sex: _____ HT: _____ WT: _____		Hair: _____ Eyes: _____		Country: _____	
Address: Physical <input type="checkbox"/> Mailing <input type="checkbox"/>		City: _____		State: _____ Zip: _____	
Vehicle has current proof of insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration Date of Insurance Card: _____					
DID OPERATE THE FOLLOWING VEHICLE / MOTOR VEHICLE AT THE ABOVE LISTED LOCATION:					
Commercial Vehicle: <input type="checkbox"/>		US DOT #: _____		VIN #: _____	
Vehicle License: _____		Lic. Sub: _____		Expiration: _____	
Registered Owner: _____		Year: _____		Make: _____	
<input type="checkbox"/> Same		Model: _____		Type: _____	
Address: _____		Color: _____			
DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE(S):					
1. Violation		NOC <input type="checkbox"/> NRS <input type="checkbox"/> CFR <input type="checkbox"/> County Code <input type="checkbox"/> Municipal Code <input type="checkbox"/>			
Description: _____		Posted Speed: _____ Actual Speed: _____ Cited Speed: _____			
To Wit: _____					
NO BAIL: <input type="checkbox"/>		Bail Amount: _____		Admin Assessment: _____	
		Facility Assessment: _____		Total: _____	
2. Violation		NOC <input type="checkbox"/> NRS <input type="checkbox"/> CFR <input type="checkbox"/> County Code <input type="checkbox"/> Municipal Code <input type="checkbox"/>			
Description: _____					
NO BAIL: <input type="checkbox"/>		Bail Amount: _____		Admin Assessment: _____	
		Facility Assessment: _____		Total: _____	
I certify (or Declare) that I have reasonable grounds/probable cause to believe and do believe that above named person committed the above offense(s) contrary to law.					
Officer/Complainant PRINTED Name: _____		Officer/Complainant's Signature: _____		I.D. # _____	
Las Vegas Municipal Court 400 Stewart Ave. Las Vegas Nevada 89101 702-382-2938 <input type="checkbox"/>		North Las Vegas Municipal Court 2240 Civic Center Drive North Las Vegas Nevada 89030 702-633-1130 <input type="checkbox"/>		Department of Juvenile Justice Services 601 N. Pecos Las Vegas Nevada 89101 702-455-5200 <input type="checkbox"/>	
Mesquite Municipal Court 500 Hillside Drive Mesquite Nevada 89027 702-346-5291 <input type="checkbox"/>		Goodsprings Justice Court Box 19155 Jean Nevada 89019 702-874-1405 <input type="checkbox"/>		Henderson Justice Court 243 Water St. Henderson Nevada 89015 702-455-7980 <input type="checkbox"/>	
Moapa Valley Justice Court Box 337 Overton Nevada 89040 702-397-2840 <input type="checkbox"/>		Las Vegas Justice Court 200 S. Third St. Las Vegas Nevada 89155-2511 702-455-4435 <input type="checkbox"/>		North Las Vegas Justice Court 2428 Martin Luther King Blvd. North Las Vegas Nevada 89032 702-455-7801 <input type="checkbox"/>	
Searchlight Justice Court Box 815 Searchlight Nevada 89046 702-297-1252 <input type="checkbox"/>		Pahump Justice Court 1520 E. Basin Ave. Pahump Nevada 89060 775-751-7080 <input type="checkbox"/>		Beatty Justice Court P.O. Box 805 Beatty Nevada 89003 775-553-2951 <input type="checkbox"/>	
Court: _____ Phone: _____ Address: _____					
You are hereby ordered to appear on _____ Day of _____ 20 _____ at _____ am/pm to answer the above charge(s)					
Without admitting having committed the above offense(s), I hereby promise to respond as directed on this notice and waive my right to be taken immediately before a magistrate (NRS 484.799 and NRS 484.803)					
Defendants Signature X		<input type="checkbox"/> Interpreter Needed		<input type="checkbox"/> Court Mandatory	
Language: _____		Total Bail: \$			
Failure to comply with this complaint or future dates relating to this complaint will constitute a separate offense.					

Clark County Regional Misdemeanor Citation

Citation #: E05160110805260

Defendant is: an Adult

Event #:

This is a traffic citation

Accident occurred: N

Violation occurred in a school zone: N

Violation resulted in injuries: N

Officer's Report: N Crime Report: N

Defendant's Details

Name: DOE, JOHN

Address: 4321 CITY COURT STREET

City: Las Vegas, State: NV, Zip: 89101

Date of Birth: 06/12/1960

Origin: 0, Sex : M

Height: 5 ft 8 in, Weight: 150 lbs

Hair: Brown, Eyes: BRN

SSN: , DL: 123456789

DL State NV, DL Class : C

DL Exp Date : 06/12/2006

DL Restrictions: A

D.L Endorsements:

Violation Date/Time: 6/9/05 11:11 AM

Date of Issuance: 06/09/2005

Violation Location: LAS VEGAS BLVD At

STEWART AVE

Reason for stop: Expired Reaistration

Vehicle Information

Veh No: TESTPLT State: NV

VIN:

Veh Year: 2004 Make: Chevrolet

Veh Type: PC Model:

Veh ExpDt: 06/09/2007 Color: Blue

Reg Owner: DOE, JOHN

Reg Owner Addr: 4321 CITY COURT STREET

Reg Owner City: Las Vegas

Reg Owner State: NV Zip: 89101

Violation Information

[A] Expired license plates

Offense Code: 103 (Bail: See Court)

To Wit: DMV SHOWS PLATES EXPRED

05052005

[B] No proof of insurance in vehicle

Offense Code: 111 (Bail: See Court)

To Wit: NO PAPERS IN VEHICLE

[C] Seat belts and shoulder harness -
equipped and used

Offense Code: 1836 (Bail: See Court)

To Wit: NOT WORN

Violation occurred in a construction
zone while workers present: N

School Zone: N

Collision: N

Alleged Speed: Method: Visual

Speed Limit:

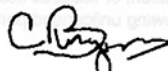
Officer Badge: 5260

Officer Name: Burgess, Charles

Department: LVMPD

Officer 2:

OFFICER'S SIGNATURE



APPEARANCE REQUIRED

You are hereby ordered to appear to answer the
above charges in the:

Las Vegas Municipal Court

400 Stewart Avenue

Las Vegas, Nevada 89101

Phone: 229-6497 (800) 654-6856

On 07/07/2005 during business hours.

Without admitting having committed each
of the above infractions / offenses, I
hereby promise to respond as described
on this notice and waive my right to be
taken immediately before a magistrate.

Interpreter : Y, Language: SPANISH

DRIVER'S SIGNATURE

